

<i>SERFF Tracking Number:</i>	<i>LDRE-125702910</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Great West Casualty Company</i>	<i>State Tracking Number:</i>	<i>EFT \$25</i>
<i>Company Tracking Number:</i>	<i>G2108M</i>		
<i>TOI:</i>	<i>16.0 Workers Compensation</i>	<i>Sub-TOI:</i>	<i>16.0004 Standard WC</i>
<i>Product Name:</i>	<i>Workers Compensation</i>		
<i>Project Name/Number:</i>	<i>Item Filing Adoption/G2108M</i>		

## Filing at a Glance

Company: Great West Casualty Company

Product Name: Workers Compensation

TOI: 16.0 Workers Compensation

Sub-TOI: 16.0004 Standard WC

SERFF Tr Num: LDRE-125702910

SERFF Status: Closed

Co Tr Num: G2108M

State: Arkansas

State Tr Num: EFT \$25

State Status: Fees verified and received

Filing Type: Rate/Rule

Co Status:

Reviewer(s): Betty Montesi, Carol Stiffler

Author: Cindy Searls

Date Submitted: 06/20/2008

Disposition Date: 06/23/2008

Disposition Status: Approved

Effective Date Requested (New): 09/01/2008

Effective Date Requested (Renewal): 09/01/2008

Effective Date (New): 09/01/2008

Effective Date (Renewal):

State Filing Description:

## General Information

Project Name: Item Filing Adoption

Project Number: G2108M

Reference Organization: NCCI

Reference Title: N/A

Filing Status Changed: 06/23/2008

State Status Changed: 06/23/2008

Corresponding Filing Tracking Number: N/A

Filing Description:

Great West Casualty Company is filing to adopt approved NCCI Item B-1407. We will apply our currently approved loss cost multiplier of 1.215, which will result in a Catastrophe rate of \$0.01 and a Terrorism rate of \$0.01. We are requesting an effective date of September 1, 2008.

Status of Filing in Domicile:

Domicile Status Comments:

Reference Number: Item Filing B-1407

Advisory Org. Circular: CIF-2008-05

Deemer Date:

If you have any questions or concerns, please contact me at 800-228-8602 Ext. 7849, or by e-mail at [c.searls@gwccnet.com](mailto:c.searls@gwccnet.com).

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Sincerely,  
GREAT WEST CASUALTY COMPANY

Cindy Searls  
Compliance Technician

## Company and Contact

### Filing Contact Information

Cindy Searls, Compliance Technician	c.searls@gwccnet.com
1100 W. 29th Street	(800) 228-8602 [Phone]
South Sioux City,, NE 68776	(402) 494-7480[FAX]

### Filing Company Information

Great West Casualty Company	CoCode: 11371	State of Domicile: Nebraska
1100 W. 29th Street	Group Code: 150	Company Type: P & C
So. Sioux City, NE 68776	Group Name:	State ID Number:
(402) 494-2411 ext. [Phone]	FEIN Number: 47-6024508	
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## Filing Fees

Fee Required?	Yes
Fee Amount:	\$25.00
Retaliatory?	No
Fee Explanation:	\$25.00 to adopt an advisory organization's item filing.
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Great West Casualty Company	\$25.00	06/20/2008	21013390

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## Correspondence Summary

### Dispositions

<b>Status</b>	<b>Created By</b>	<b>Created On</b>	<b>Date Submitted</b>
Approved	Carol Stiffler	06/23/2008	06/23/2008

*SERFF Tracking Number: LDRE-125702910*

*State: Arkansas*

*Filing Company: Great West Casualty Company*

*State Tracking Number: EFT \$25*

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*TOI: 16.0 Workers Compensation*

*Sub-TOI: 16.0004 Standard WC*

*Product Name: Workers Compensation*

*Project Name/Number: Item Filing Adoption/G2108M*

## **Disposition**

Disposition Date: 06/23/2008

Effective Date (New): 09/01/2008

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number:	LDRE-125702910	State:	Arkansas
Filing Company:	Great West Casualty Company	State Tracking Number:	EFT \$25
Company Tracking Number:	G2108M		
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Product Name:	Workers Compensation		
Project Name/Number:	Item Filing Adoption/G2108M		

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	NAIC Loss Cost Filing Document for Workers' Compensation	Approved	Yes
Supporting Document	NAIC loss cost data entry document	Approved	Yes

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## **Rate Information**

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## Supporting Document Schedules

<b>Bypassed -Name:</b>	Uniform Transmittal Document-Property & Casualty	<b>Review Status:</b>	Approved	06/23/2008
<b>Bypass Reason:</b>	Not applicable.			
<b>Comments:</b>				
<b>Bypassed -Name:</b>	NAIC Loss Cost Filing Document for Workers' Compensation	<b>Review Status:</b>	Approved	06/23/2008
<b>Bypass Reason:</b>	Not applicable.			
<b>Comments:</b>				
<b>Bypassed -Name:</b>	NAIC loss cost data entry document	<b>Review Status:</b>	Approved	06/23/2008
<b>Bypass Reason:</b>	Not applicable.			
<b>Comments:</b>				